

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | SP | | 3-29-01 |
| O.I.P.E. CLASSIFIER | | 32 | EG |
| FORMALITY REVIEW | AMW | 751 | 10-2-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|----------|
| Final | Original |
| 1 | 3/29/01 |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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10/23/01

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